UTILITY	Attorney Docke		42P15616			-
PATENT APPLICATION	First Inventor	Xing	Su, et al.			-
TRANSMITTAL	Title Program	nmable M	olecular Barcod	es		_
(indiana under 27 CFR 1.53(b))	Express Mail I		EL962312			ユ
only for new nonprovisional applications under 37 CFR 1.53(b))			الكالا المستقير	Mail Stop Patent Ap Commissioner for P	plication	1
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application	n contents		RESS TO:	P.O. Box 1450 Alexandria, VA 223	13-1450	HT0
Form (e.g. PTO/SB/17)		7. 🔲 C	D-ROM or CD-F computer Progra	R in duplicate, large m (Appendix)	e table or	S
(Submit an original and a duplicate for her precessing)  Applicant claims small entity status.		9 Nucle	eotide and/or A oplicable, all ne	mino Acid Sequ	ence Submission	2,5
See 37 CFR 1.27.	56 1			r Readable Forn	n (CRF)	8
Specification (preferred arrangement set forth below)  - Descriptive title of the Invention	ges <u>30</u> . I	a. b.	Specification S	Sequence Listing OM or CD-R (2 c	g on:	22
Cross References to Related Applications     Statement Regarding Fed sponsored R & D     Deference to sequence listing, a table,		C.	ii. 🛚 paper	nts verifying ider	ntity of above copies	_
or a computer program listing appendix  - Background of the Invention  - Brief Summary of the Invention  - Brief Description of the Drawings (if filed)  - Detailed Description  - Claim(s)  - Abstract of the Disclosure		10.	37 C.F.R. § 3.73 (when there is a English Translation Dist	n assignee) tion Document (if a closure	Power of Attorney	
<ol> <li>Drawing(s) (35 U.S.C. 113) [Total Sheets</li> <li>Oath or Declaration [Total Pages</li> <li>Newly executed (original or copy)</li> </ol>	_J	12 □	Statement (IDS Preliminary Am Return Receipt (Should be spe Certified Copy	)/PTO-1449 endment Postcard (MPEP 5 cifically itemized) of Priority Docume	Application Amend to Reflect Claim of Priority	led
<ul> <li>a.  Newly executed (original prior application) (37 C.I. (for continuation/divisional with Box</li> <li>i.  DELETION OF INVENTOR(S) (Signed statement attached deleting invenamed in the prior application, see 37 C 1.63(d)(2) and 1.33(b).</li> </ul>	S) entor(s)	16. 🗆	(if foreign priori	ity is claimed)	5 U.S.C. 122 (b)(2)(B)(i). SB/35 or its equivalent.	
		1				
18. If a CONTINUING APPLICATION, check approspecification following the title, or in an Application  Continuation Divisional	priate box, and Data Sheet und Continuation-i	n-part (CIF		Group/Art U	init:	
For CONTINUATION OR DIVISIONAL APPS only: The entire disc	losure of the prior sional application a	application, i and is hereby	rom which an oath o Incorporated by refe	erence. The incorporate	ion can only be relied upon when	
part of the disclosure of the accompanying community of a portion has been inadvertently omitted from the submitted ap	nlication parts.		NCE ADDRESS			

Roberta J. Hanson Blakely, Sokoloff, Taylor & Zafman LLP Name 12400 Wilshire Boulevard, Seventh Floor Address Zip Code 90025-1030 State California (303) 740-6962 Los Angeles City Fax

(303) 740-1980 Telephone USA Country Registration No. (Attorney/Agent) 51,774 Roberta J. Hanson 09/24/03 Name (Print/Type) Date Robertson Hanson

## **FEE TRANSMITTAL** Complete if Known **Application Number** for FY 2003 Filing Date Effective 01/01/2003. Patent fees are subject to annual revision. First Named Inventor Xing Su Applicant claims small entity status. See 37 CFR 1.27. **Examiner Name** Group/Art Unit **TOTAL AMOUNT OF PAYMENT** (\$) 1,170.00 Attorney Docket No. 42P15616 METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued) **ADDITIONAL FEES ⊠** Check Credit card Money Order Other ☐ None Deposit Account Large Entity Small Entity Deposit Code (\$) Account 02-2666 Fee Description Fee Paid Number 1051 65 Surcharge - late filing fee or oath 130 2051 1052 Deposit 50 2052 Surcharge - late provisional filing fee or 25 Blakely, Sokoloff, Taylor & Zafman LLP 2053 130 2053 130 Non-English specification The Commissioner is authorized to: ( check all that apply) 1812 1812 2.520 2,520 For filing a request for ex parte reexamination Charge fee(s) indicated below 1804 920 1804 Credit any overpayments 920 \* Requesting publication of SIR prior to Examiner action Charge any additional fee(s) required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. 1805 1,840 1805 1.840 Requesting publication of SIR after Charge fee(s) indicated below, except for the filing fee Examiner action to the above-identified deposit account 1251 110 2251 Extension for reply within first month **FEE CALCULATION** 1252 410 2252 Extension for reply within second month 205 1. **BASIC FILING FEE** 1253 930 2253 Extension for reply within third month Large Entity 1254 1,450 2254 Extension for reply within fourth month 725 Fee Description Fee Paid Code (5) Code (\$) 1255 1,970 2255 Extension for reply within fifth month 985 1404 320 2401 160 1001 750 2001 Notice of Appeal 375 Utility filing fee 750.00 1002 330 2002 1402 320 2402 165 Filing a brief in support of an appeal Design filing fee 1003 520 2003 1403 280 2403 260 Plant filing fee 140 Request for oral hearing 1004 2004 750 375 Reissue filing fee 1451 1.510 2451 Petition to institute a public use proceeding 1005 160 2005 80 Provisional filing fee 1452 110 2452 55 Petition to revive - unavoidable 1453 1,300 2453 Petition to revive - unintentional SUBTOTAL (1) (\$) 750.00 1501 1,300 2501 650 Utility issue fee (or reissue) EXTRA CLAIM FEES Extra 1502 470 2502 235 Design issue fee Fee from Claims below Fee Paid 1503 2503 630 Plant issue fee Total Claims 2₫\* 18.00 \$252.00 1460 130 2460 130 Petitions to the Commissioner Independent Claims 3\* 2 84.00 \$168.00 1807 1807 50 Prosessing fee under 37 CFR 1.17(q) Multiple Dependent 1806 180 1806 180 Submission of Information Disclosure Stmt Large Entity Small Entity 8021 8021 40 Recording each patent assignment per Fee Fee Description property (times number of properties) Code 1809 750 1809 Filing a submission after final rejection 1202 18 2202 9 (37 ČFR § 1.129(a)) Claims in excess of 20 1201 2201 84 42 1810 Independent claims in excess of 3 750 2810 For each additional invention to be examined (37 CFR § 1.129(b)) 1203 280 2203 140 Multiple Dependent claim, if not paid 1204 2204 1801 2801 375 Request for Continued Examination (RCE) 84 \*\*Reissue independent claims over original 750 42 1802 900 1802 Request for expedited examination 1205 2205 18 \*\*Reissue claims in excess of 20 and over of a design application Other fee (specify) original patent SUBTOTAL (2) (\$) 420.00 Reduced by Basic Filing Fee Paid \*\*or number previously paid, if greater, For Reissues, see below SUBTOTAL (3) (\$) SUBMITTED BY Complete (if applicable) Name (Print/Type) Registration No. Roberta J. Hanson 51,774 Telephone (303) 740-1980 (Attomey/Agent) Signature druth Hanson

09/24/03

Date